

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/596,282

FILING DATE

06-08-06

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		2			
2		1				
3		1				
4		1				
5		2				
6		2				
7		2				
8	1		1			
9		1				
10			1			
11			1			
12			1			
13			1			
14			1			
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TOTAL IND.	2	↓	2	↓		↓
TOTAL DEP.	8	←	6	←		←
TOTAL CLAIMS	10		8			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						